ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE					
FEE DETERMINATION	CM	20501	011/					
O.I.P.E. CLASSIFIER		10/	2/23					
FORMALITY REVIEW		10						
RESPONSE FORMALITY REVIEW								
	Cu)	64830	3-25					

INDEX OF CLAIMS

•	Rejected	N	Non-elected
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If more than 150 claims or 10 actions staple additional sheet here

Best Available Copy